PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. Department of the Committee of Information under a United States of Information under a United States of Information under the United States of Information under t

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/538,844			ing Date 13/2005	To be Mailed
	Al	PPLICATION A	ENTITY \square	OR		HER THAN					
Н	FOR		(Column 1) NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	T	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	-	N/A		N/A	ı	N/A		1	N/A	.,,
	SEARCH FEE (37 CFR 1.16(k), (i),		N/A		N/A		N/A		1	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A	
TO'	TAL CLAIMS CFR 1.16(i))		minus 20 =				x \$ =		OR	x s =	
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *				x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheer is \$29 additi 35 U.	ts of pape 50 (\$125 ional 50 s S.C. 41(ngs exceed 100 on size fee due) for each on thereof. See ' CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))									1		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	06/03/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	· 13	Minus	 20	= 0		x \$ =		OR	X \$52=	0
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	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
ENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus		-	l	x \$ =		OR	x s =	
M	Independent (37 CFR 1,16(h))		Minus	***			x \$ =		OR	x s =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
* If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	TOTAL ADD'L FEE	
I'm entry in column is uses man the entry in column 2, write 0' in column 3. If the "Highest Number Perviously Paid For IN THIS SPACE is less than 30, enter" 20' "If the "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' TINA J. BARDEN/ The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number Privously Paid For IN THIS SPACE is less than 3, enter "3' The "Highest Number P											

This collection of information is orquired by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public with in it is life (and by the USFTO to process) an application Confidentiality is governed by \$3 U.S.C. 122 and \$3 CFR 1.4. It has location in estimated to the 12 minutes to complete, encuding pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the CERF (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrius, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandrius, VA 22313-1450.